

MEDICAID LONG TERM CARE TASK FORCE
MEETING AGENDA

Senate Hearing Room, Boji Tower

Friday January 21, 2004

9:30 a.m.-- 3:30 p.m.

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| 9:30 a.m. | Informal Gathering and Networking | All |
| 10:00 a.m. | Call to Order & Introductions | RoAnne Chaney, Chair |
| 10:05 a.m. | Review and Approval of Agenda | Members |
| 10:10 a.m. | Review and Approval of January 10 Minutes | Members |
| 10:15 a.m. | Public Comment | |
| | <i>Meeting Topics</i> | <i>Desired Outcome</i> |
| 10:45 a.m. | Remaining Issues | Everyone understands why we're here and how we will proceed for the meeting. |
| 10:50 a.m. | Revisit the Mission and Vision for the Task Force | All Task Force members are focused on the agreed upon mission and vision for the recommendations. |
| 11:05 a.m. | Presentation of Current System | Agreement on general aspects of how Medicaid Long Term Care currently functions |
| 11:15 a.m. | General Overview of Proposed System by Task Force Report | Through small group activities, the group will come to general consensus on the key elements of the recommended changes. |
| 11:45 a.m. | Presentation/Agreement on Glossary of Terms | Agreement on key terms used throughout the recommendations by various workgroups |
| 12 noon | Break (TF members pick up lunches) | |
| 12:15 p.m. | Presentations by Chairs of Workgroups on Key Elements/Themes | Agreement on overarching themes/key elements running through workgroup recommendations |
| 1:15 p.m. | Mapping Out the Proposed System – Case Study Presentations | Agreement on general aspects of how Medicaid Long Term Care will function |
| 3:00 p.m. | Remaining Issues | |
| 3:25p.m. | Next meeting date and agenda topics | |
| | <ul style="list-style-type: none">Action Needed: February 14, 2005 Task Force Meeting | |

Vision Statement adopted at the August 9, 2004 meeting:

Within the next ten years, Michigan will achieve a high quality, easily accessible system of publicly and privately funded long-term care supports. These supports will include a full array of coordinated services available wherever an individual chooses to live and will be mobilized to meet the needs of each person with a disability or chronic condition, of any age, who needs and wishes to access them.

The arrangement and type of care and supports for each person will be determined by that person. Person-centered planning, which places the person as the central focus of supports and care planning, will be used to determine all facets of care and supports plans. Each person, and his or her chosen family, friends, or professionals, will initiate or re-start the process whenever the person's needs or preferences change.

Charge to the Task Force:

The Task Force is advisory in nature and shall:

1. Review existing reports and reviews of the efficiency and effectiveness of the current mechanisms and funding for the provision of Medicaid long-term care services in Michigan and identify consensus recommendations.
2. Examine and report on the current quality of Medicaid long-term care services in Michigan and make recommendations for improvement in the quality of Medicaid long-term care services and home-based and community-based long-term care services provided in Michigan.
3. Analyze and report on the relationship between state and federal Medicaid long-term care funding and its sustainability over the long term.
4. Identify and recommend benchmarks for measuring successes in this state's provision of Medicaid long-term care services and for expanding options for home-based and community-based long-term care services.
5. Identify and make recommendations to reduce barriers to the creation of and access to an efficient and effective system of a continuum of home-based, community-based, and institutional long-term care services in Michigan.